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UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorn	ney Docket No.	N/A)
	nventor	Clarence Leroy Gantt	
Title		llet Enclosure	

(Only for new nonprovision	al applications under 37 CFR 1.53(b))	Express	Mail Label No.	.FU991	431815	3705
	TION ELEMENTS			Patent Applicati	on ·	
	erning utility patent application content.					1
1. Submit an original and a d Applicant claims sr	orm (e.g., PTO/SB/17) uplicate for fee processing/ nall entity status.	7 8. Nuc	CD-ROM or CD-R in Computer Program leotide and/or Amino Applicable, all necessar	(<i>Appendix</i>) cid Sequence S		
See 37 CFR 1.27. Specification (preferred arrangement - Descriptive title	of the invention	a. [Computer Readab Specification Sequence	ole Form (CRF)	ت ت	61453
 Statement Rega 	e to Related Applications ording Fed sponsored R & D quence listing, a table,		i. CD-ROM o	or CD-R (2 ∞pie	s); or 6	
or a computer pr	rogram listing appendix	c. [Statements verify	ing identity of ab	ove copies	
 Background of t Brief Summary 	of the Invention		CCOMPANYING]
- Brief Description - Detailed Descrip	n of the Drawings (if filed)	9.	Assignment Paper			
- Claim(s)		10.	37 CFR 3.73(b) S	tatement	Power of Attorney	
- Abstract of the		, 11.	(when there is an English Translation		•	1
4. X Drawing(s) (35 U. 5. Oath or Declaration	S.C. 113) [Total Sheets 6]] 12.	Information Disclo	osure	Copies of IDS Citations	
	uted (original or copy)	13.	Preliminary Amer	ndment		1
Convitor a	prior application (37 CFR 1.63 (d)) tion/divisional with Box 18 completed)	14.	X Return Receipt P (Should be specif	ically itemized)		ļ.
i. DELET	ION OF INVENTOR(S)	15.	Certified Copy of (if foreign priority	is ciaimeu)		
named in t	tement attached deleting inventor(s) the prior application, see 37 CFR and 1.33(b).	16.[Nonpublication R (b)(2)(B)(i). Applie or its equivalent.	lequest under 35 cant must attach	U.S.C. 122 form PTO/SB/35	ļ
	Sheet. See 37 CFR 1.76	17.	Other:			
18. If a CONTINUING APPLI or in an Application Data She	CATION, check appropriate box, and set under 37 CFR 1.76: Divisional Continuation-in-part (C		of prior application No.:		inary amendment,	
Prior application information:	Examiner	***	Group Art Unit:	oath or declaration	n is supplied under	
	ONAL APPS only: The entire disclosure f the disclosure of the accompanying cor relied upon when a portion has been ina	ntinuation or di idvertently omit	ted from the submitted a		prated by reference.	
	19. CORRESPO	NDENCE ADI	DRESS			-
Customer Number or Bar C			or	Correspondence a	address below .	
Name	Clarence Leroy Gan	t t				4
	850 Country Drive					4
Address			· · · · · · · · · · · · · · · · · · ·		60010-413	-
City	Barrington	State	IL	Zip Code		
Country	United States	Telephone	847-381-7057	Notify	847-381-7 by phone	ffrst
Name (Print/Type)		Reg	gistration No. (Attorn	ey/Agent)		4
Signature				Date		J

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PTO/SB/17 (01-03)

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

Signature

TOTAL AMOUNT OF PAYMENT

Complete if Known					
Application Number					
Filing Date	07/15/03				
First Named Inventor	Clarence Leroy Gantt				
Examiner Name					
Art Unit					
Attorney Docket No					

TOTAL AMOUNT OF PAYMENT	FEE CALCULATION (continued)						
METHOD OF PAYMENT (check all that apply)							
X Check Credit card Money Order None	3. ADDITIONAL FEES Large Entity Small Entity						
Deposit Account:	5 5- 5- Fee Fee Description	ee Paid					
Deposit Account	1051 130 2051 65 Surcharge - late filing fee or oath						
Number Deposit	1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet						
Account Name	1053 130 1053 130 Non-English specification						
The Commissioner is authorized to: (check all that apply)	1812 2,520 1812 2,520 For filing a request for ex parte reexamination						
Charge fee(s) indicated below Credit any overpayments	1804 920* 1804 920* Requesting publication of SIR prior to Examiner action						
Charge any additional fee(s) during the pendency of this application Charge fee(s) indicated below, except for the filing fee	1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action						
to the above-identified deposit account.	- se services for reply within first month						
FEE CALCULATION	Extension for reply within second month						
1. BASIC FILING FEE	1252 410 2252 205 Extension for reply within third month						
arge Entity Small Entity	1254 1,450 2254 725 Extension for reply within fourth month						
Fee Fee Fee Fee Fee Paid Code (\$) Code (\$)	Secretary for conty within fifth month						
1001 750 2001 375 Utility filing fee 375	1 1200 1,010 2200 400 11 1500 11 1500 11						
1002 330 2002 165 Design filing fee	too Filling a brief in support of an appeal						
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1004 750 2004 375 Reissue filing fee	nonceding						
1005 160 2005 80 Provisional filing fee							
SUBTOTAL (1) (\$) 375	i i i i i i i i i i i i i i i i i i i						
2. EXTRA CLAIM FEES FOR UTILITY AND REISSU							
Extra Claims below Fee Pai	The same of the Stant inches too						
	Database to the Commissioner						
Claims	7 (CER 1 17(0)						
Multiple Dependent	see Out-insign of Information Disclosure Stmt						
Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	8021 40 8021 40 Recording each patent assignment per property (times number of properties)						
1202 18 2202 9 Claims in excess of 20	1809 750 2809 375 Filing a submission after final rejection						
1201 84 2201 42 Independent claims in excess of 3	(37 CFR 1.129(a))						
1203 280 2203 140 Multiple dependent claim, if not paid	id 1810 750 2810 375 For each additional invention to be examined (37 CFR 1.129(b))						
1204 84 2204 42 ** Reissue independent claims over original patent	1801 750 2801 375 Request for Continued Examination (RCE)						
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 900 1802 900 Request for expedited examination of a design application						
SUBTOTAL (2) (\$) None	Other fee (specify)						
SUBTOTAL (2) (\$) NOTICE **or number previously paid, if greater, For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) No	ne					
(Complete (if applicable)							
SUBMITTED BY N/A	Registration No. Telephone						
Name (Print/Type)	(Attorney/Agent)						

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